



**ALLISON, MAY, ALVIS, FUHRMEISTER &
KIMBROUGH, L.L.C.**

JFM

LINDSEY J. ALLISON
WM. RANDALL MAY*
W. BARRY ALVIS
JAMES W. FUHRMEISTER
JULIA C. KIMBROUGH

*ALSO PATENT ATTORNEY

ATTORNEYS AT LAW

1300 CORPORATE DRIVE
BIRMINGHAM, ALABAMA 35242
TELEPHONE (205) 991-6367
TELECOPIER (205) 991-8852

Writer's E-Mail: randymay@allisonmay.com

MAILING ADDRESS:
P.O. BOX 380275
BIRMINGHAM, ALABAMA 35238

December 5, 2006

The Honorable Commissioner for Patents
In the United States Patent and Trademark Office
P.O. Box 1450
Alexandria, Virginia 22313-1450

Re: Amendment to Patent Application Number 10/754,650 for Apparatus for Coupling Intravenous Infusion Units with Mobile Transport Vehicles by Jerry W. Norris

Sir:

In response to Examiner's Office Action dated June 21, 2006 regarding the above-referenced application, transmitted herewith for filing are the following enclosures:

A Date-of-Receipt Postcard;
Transmittal Form;
Petition for Extension of Time;
Amendment Transmittal; and
Amendment for this Application.

Sincerely,

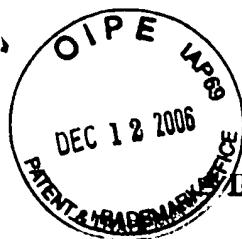
Wm. Randall May
Attorney Reg. No. 31,120

CERTIFICATE OF MAILING

I hereby certify that this paper along with all of the above listed items is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450

Date: 12-7-2006

Wm. Randall May



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

JERRY W. NORRIS

Serial No.: 10/754,650

Filed: January 12, 2004

For: Apparatus for Coupling Intravenous Infusion Units with Mobile Transport Vehicles

*
* Art Unit 3632
*

*
* Examiner: Steven M. Marsh
*

*

AMENDMENT UNDER 37 CFR §1.111

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant is
[X] a small entity -- verified statement:
[] attached.
[X] already filed.
[] other than a small entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.
(a) [] Applicant petitions for an extension of time under 37 CFR 1.136 (fees: 37 CFR 1.17(a)-(d)) for the total number of months checked below:

Extension (months)	Fee for other than <u>small entity</u>	Fee for <u>small entity</u>
[] one month	\$ 120.00	\$ 60.00
[] two months	\$ 450.00	\$ 225.00
[X] three months	\$1,020.00	\$ 510.00
[] four months	\$1,590.00	\$ 795.00
[] five months	\$2,160.00	\$1,080.00
		Fee <u>\$ 510.00</u>

[] An extension for _____ months has already been secured and the fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ _____
OR

- (b) [] Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY	
Claims Remaining After Amendment	Highest No. Previously Paid for	Present Extra	Rate	Addit. Fee or	Addit. Fee
Total * 1	Minus ** 10	= 0	x 25 = \$	x50=	\$ 0
Indep. * 1	Minus *** 3	= 0	x100 = \$	x200=	\$ 0
[] First Presentation of Multiple Dep. Claim			+180= \$	+360=	\$ 0
			Total Addit. Fee \$ 0.00	or	Total Addit. Fee \$ 0.00

(c) No additional claims fee is required.

OR

(d) Total additional fee for claims required \$ _____.

FEE PAYMENT

5. Attached is a check in the sum of \$ 510.00.

Charge Account No. _____ the sum of \$ _____.
A duplicate of this transmittal is attached.

FEE DEFICIENCY

6. If any additional extension and/or fee is required, charge Account No. _____.

AND/OR

If any additional fee for claims is required, charge Account No. _____.



Wm. Randall May, Reg. No. 31,120
Principal Attorney of Record
1300 Corporate Drive
Birmingham, Alabama 35242

Telephone: (205) 991-6367

Faximile: (205) 991-8852

E-Mail: randymay@allisonmay.com

CERTIFICATION UNDER 37 C.F.R. §§ 1.8(a) and 1.10

I hereby certify that, on the date shown below, this correspondence is being:

MAILING

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37 C.F.R. §1.8(a)

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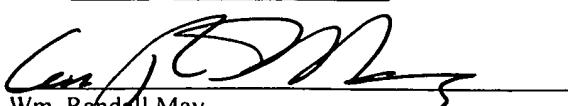
37 C.F.R. §1.10

as "Express Mail Post Office to Addressee"
Mailing Label No. _____

TRANSMISSION

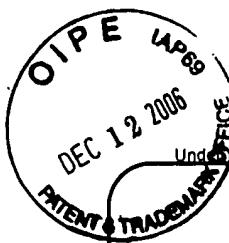
facsimile transmitted to the Patent and Trademark Office, (703) _____ - _____.

Date: 12-7-2006



Wm. Randall May

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

		Application Number	10/754,650
		Filing Date	01/12/2004
		First Named Inventor	Jerry W. Norris
		Art Unit	3632
		Examiner Name	Marsh, Steven M.
Total Number of Pages in This Submission	9	Attorney Docket Number	03-338 R

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
<input type="checkbox"/> Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Allison, May, Alvis, Fuhrmeister & Kimbrough, L.L.C.		
Signature			
Printed name	Wm. Randall May		
Date	12-7-2006	Reg. No.	31,120

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450; Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Wm. Randall May	Date	12-7-2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.